

**DODGE TRUST BOARD OF TRUSTEES
GRANT APPLICATION FORM**

209 Pearl Street
Council Bluffs, IA 51503
(712) 328-4620

DATE: _____

NAME OF APPLICANT _____

ADDRESS _____ TELEPHONE _____

CITY, STATE & ZIP _____

IRS EXEMPTION STATUS – UNDER WHICH SECTION (if applicable) _____
(Please attach copy)

FEDERAL ID # _____ DATE ORGANIZED _____

TOTAL PROJECT COST _____ AMOUNT REQUESTED _____

PLEASE ENCLOSE YOUR PROJECT BUDGET

WHICH OF THE FOLLOWING MOST ACCURATELY APPLY TO YOUR PROJECT? RESPOND TO THE
REQUESTS FOR ADDITIONAL INFORMATION AS APPLICABLE.

_____ NEW PROGRAM _____ EXISTING PROGRAM

HOW HAS THIS PROJECT BEEN FUNDED IN THE PAST? _____

PREVIOUSLY APPLIED FOR DODGE TRUST FUNDS – YES _____ NO _____

DODGE TRUST HAS PREVIOUSLY FUNDED THIS PROJECT – YES _____ NO _____

LAST DATE FUNDS WERE RECEIVED _____

MATCHING FUNDS WILL BE UTILIZED ON THIS PROJECT – YES _____ NO _____

DODGE TRUST WILL BE THE SOLE SOURCE OF FUNDING FOR THIS PROJECT -

YES _____ NO _____

WHAT OTHER SOURCES OF FUNDING WILL BE UTILIZED FOR THIS PROJECT? _____

DESCRIBE THE PURPOSE OF THIS REQUEST. BE SPECIFIC. (WHO WILL BENEFIT AND HOW?)

PLEASE PROVIDE A BRIEF HISTORY, PURPOSE AND LONG RANGE GOALS OF YOUR ORGANIZATION.

PLEASE LIST OTHER SIGNIFICANT FUNDING SOURCES FOR THIS PROJECT IN THE LAST 3 YEARS.

	\$
	\$
	\$

IS YOUR ORGANIZATION TAX SUPPORTED OR AFFILIATED WITH A TAX SUPPORTED ORGANIZATION – YES _____ NO _____

IF YES, PLEASE IDENTIFY THE ORGANIZATION (CITY, ETC.)

NAME _____ FEDERAL ID# _____

ADDRESS _____

PLEASE PROVIDE A COPY OF YOUR MOST RECENT ANNUAL REPORT, INCLUDING FINANCIAL STATEMENTS, YOUR CURRENT YEAR BUDGET AND GROSS ANNUAL INCOME FOR THE PAST THREE YEARS (ADDITIONAL INFORMATION MAY ALSO BE REQUESTED)

NAME OF ORGANIZATION _____

NAME _____ TITLE _____

SIGNATURE _____

PLEASE DO NOT SEND BROCHURES
